

I, _____, in consideration of the willingness of the Division of State Police to allow my participation in firearms training and with acknowledgment of the risks inherent in this activity, agree to release, discharge, indemnify and hold harmless the State of Connecticut, the Department of Public Safety, Division of State Police and their respective agents, employees and representatives from and against any and all claims, demands, actions, causes of action, judgments, executions, damages, costs and expenses which I, my heirs, executors, administrators or assigns now have or may have against the aforesaid for any and all losses, costs, expenses (including attorney's fees), damages and injuries known or unknown, and injuries to property, real or personal, arising out of my participation in firearms training sessions conducted by the Division of State Police.

Dated this _____ day of _____, 20_____.

Signature of Participant
Print Names(s):

State of Connecticut)
County of) , ss.

Notary Public
My Commission Expires:

